SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 50 (check only one) 11a 11b 11c X 11d 12 13a 13b 14 1
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Brian Davis for Congress	Statements may not be sold or used by any pers the name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Brian James Davis Mailing Address 839 Amber Ridge Ln City Rochester FEC ID number of contributing federal political committee. Name of Employer Mayo Clinic Receipt For: 2008 X Primary General Other (specify)	SW State Zip Code MN 55902 C Occupation Physician Election Cycle-to-Date 50728.61	Date of Receipt M M M
Full Name (Last, First, Middle Initial) Brian James Davis Mailing Address 839 Amber Ridge Ln City Rochester FEC ID number of contributing federal political committee. Name of Employer Mayo Clinic Receipt For: 2008 X Primary General Other (specify)		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Brian James Davis Mailing Address 839 Amber Ridge Ln City Rochester FEC ID number of contributing federal political committee. Name of Employer Mayo Clinic Receipt For: 2008 X Primary General Other (specify)	State Zip Code MN 55902 C Occupation Physician Election Cycle-to-Date ▼ 51057.51	Date of Receipt M M Z 8 Z 0 0 8 Transaction ID: SA11D.5130 Amount of Each Receipt this Period 164.04 In-kind - Lodging Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional)		428.44